

COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**POLYMER ELECTROLYTE WITH HIGH STABILITY, ITS USE IN
ELECTROCHEMICAL SYSTEMS**

the specification of which (check only one item below):

- ☐ is attached hereto.
- ☐ was filed as United States Patent application Number _____ on _____ and was amended on _____ (if applicable).
- ☒ was filed as PCT International application Number PCT/CA03/00052 on January 15, 2003 and was amended on July 16, 2004 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§ 119 (a)-(d), 172 or 365(a) of any foreign application(s) for patent or inventor's certificate or of any international (PCT) application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international (PCT) application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §§119(a)-(d), 172 or 365(a):			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED UNDER 35 U.S.C. §§199, 172 OR 365(a)
Canada	2,367,290	01/16/2002	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

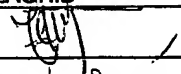
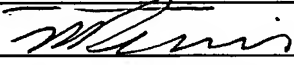
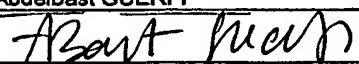
(4/04)

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I hereby appoint the attorneys and agents associated with the following PTO Customer Number of Burns, Doane, Swecker & Mathis, L.L.P. to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and transact all business in connection with international applications directed to said invention:

Customer Number 21839

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Karim ZAGHIB
Signature	
Date	3-05-2005
Residence (City, State, Country)	Longueuil, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	3672, Belcourt
City, State, ZIP, Country	Longueuil, Quebec, J4M 2M7, Canada
FULL NAME SECOND INVENTOR, IF ANY	Michel PERRIER
Signature	
Date	02/05/2005
Residence (City, State, Country)	Montreal, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	6323, 28ieme Avenue
City, State, ZIP, Country	Montreal, Quebec, H1T 1H8, Canada
FULL NAME OF THIRD INVENTOR, IF ANY	Abdelbast GUERFI
Signature	
Date	02-05-2005
Residence (City, State, Country)	Brossard, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	8655 boul. Rivard
City, State, ZIP, Country	Brossard, Quebec, J4X 1W2, Canada

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4-00

FULL NAME OF FOURTH INVENTOR, IF ANY	Elisabeth DUPUIS
Signature	<i>Elisabeth Dupuis</i>
Date	13 mai 2005
Residence (City, State, Country)	McMasterville, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	60B St-Francois
City, State, ZIP, Country	McMasterville, Quebec, Canada

5-00

FULL NAME OF FIFTH INVENTOR, IF ANY	Patrick CHAREST
Signature	<i>Patrick Charest</i>
Date	2005-05-02
Residence (City, State, Country)	Ste-Julie, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	1662, rue Calixa-Lavallee
City, State, ZIP, Country	Ste-Julie, Quebec, J3E 1P2, Canada

6-00

FULL NAME OF SIXTH INVENTOR, IF ANY	Francois ALLAIRE
Signature	
Date	
Residence (City, State, Country)	Cap-de-la-Madeleine, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	1079 Bordeleau
City, State, ZIP, Country	Cap-de-la-Madeleine, Quebec, Canada

7-00

FULL NAME OF SEVENTH INVENTOR, IF ANY	Michel ARMAND
Signature	
Date	
Residence (City, State, Country)	Montreal, Quebec, Canada CAX
Citizenship	Canada
Mailing Address	2965 Fendall
City, State, ZIP, Country	Montreal, Quebec, H3T 1N2, Canada

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Signature	
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FULL NAME OF FOURTH INVENTOR, IF ANY	Elsabeth DUPLIS
Signature	
Date	
Residence (City, State, Country)	McMasterville, Quebec, Canada
Citizenship	Canada
Mailing Address	60B St-Francois
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Signature	
Date	
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Citizenship	Canada
Mailing Address	1662, rue Calixa-Lavallee
City, State, ZIP, Country	Ste-Julie, Quebec, J3E 1P2, Canada
FULL NAME OF SIXTH INVENTOR, IF ANY	Francois ALLAIRE
Signature	<i>Francois Allaire</i>
Date	27/05/2005 - TROIS RIVIERES
Residence (City, State, Country)	Cap-de-la-Madeleine, Quebec, Canada
Citizenship	Canada
Mailing Address	1079 Bordeleau - TROIS RIVIERES
City, State, ZIP, Country	Cap-de-la-Madeleine, Quebec, Canada
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Combined Declaration and Power of Attorney
For Utility or Design Patent Application
Attorney Docket No. 032256-019
Page 2 of 3

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Citizenship	Canada
Mailing Address	1079 Bordeleau
City, State, ZIP, Country	Cap-de-la-Madeleine, Quebec, Canada
FULL NAME OF SEVENTH INVENTOR, IF ANY	Michel ARMAND
Signature <i>Michel B Armand</i>	
Date <i>April 20, 2005</i>	
Residence (City, State, Country)	Montreal, Quebec, Canada
Citizenship	Canada
Mailing Address	2965 Fendall
City, State, ZIP, Country	Montreal, Quebec, H3T 1N2, Canada

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